

WSGL WEINGARTEN, SCHURGIN, GAGNEBIN & LEOVICI LLP*Intellectual Property Law*
Patents • Trademarks • CopyrightsTen Post Office Square
Boston, Massachusetts 02109
Tel. 617.542.2290 • Fax. 617. 451.0313
www.wsglip.com**RECEIVED
CENTRAL FAX CENTER****OCT 23 2003****FACSIMILE COVER SHEET****OFFICIAL**

DATE: October 23, 2003

TO: Examiner Sandra Wegert
TC Art Unit: 1647

Fax No.: (703) 308 4242

FROM: Holliday C. Heine, Ph.D.

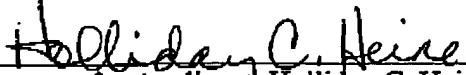
No. of pages transmitted
(including this page): 10

Our File: NU-431AX

Time:

Your Ref:

Sent by: Rose

Application No. 09/550,103
Filed Date: April 14, 2000A confirmation copy of this transmission will not be mailed unless the following is checked: []
MESSAGEPLEASE DELIVER DIRECTLY TO:
EXAMINER Sandra Wegert, Tel. (703) 308 9346
TC ART UNIT NO: 1647**FOR ENTRY**Enclosed for filing please find a: Executed Declaration of Richard C. Deth
Under 37 C.F.R. §1.132The Commissioner is hereby authorized to Charge Deposit Account No. 23-0804 for any additional
filing fees associated with this communication or credit any overpayment.
Attorney for Applicant: Holliday C. Heine, Ph.D.
Registration No. 34,346**THIS MESSAGE MAY CONTAIN CONFIDENTIAL OR PRIVILEGED INFORMATION INTENDED ONLY
FOR THE PERSON(S) IDENTIFIED ABOVE. IF IT HAS BEEN RECEIVED AT ANY OTHER PLACE OR HAS
NOT BEEN CLEARLY RECEIVED, PLEASE CALL THE ABOVE IDENTIFIED SENDING PARTY COLLECT
FOR INSTRUCTIONS. DO NOT SHOW OR DISTRIBUTE THIS MESSAGE TO ANYONE OTHER THAN THE
INTENDED RECIPIENT(S). THANK YOU.**

Application No.: 09/550,103
 Filed: April 14, 2000
 TC Art Unit: 1647
 Confirmation No.: 8235

Rev 09/03

WEINGARTEN, SCHURGIN, GAGNEBIN & LEOVICI LLP
 Ten Post Office Square
 Boston, Massachusetts 02109
 Telephone: (617) 542-2290
 Telecopier: (617) 451-0313

Via Facsimile

After Final

COMMISSIONER FOR PATENTS

P.O. Box 1450

Alexandria, VA 22313-1450

Date: October 23, 2003

Attorney

Docket No.: NU-431AX

Sir:

In re application of: **Richard C. Deth**

**Entitled: METHODS OF IDENTIFYING AND DETERMINING THE EFFECTIVENESS OF THERAPEUTIC
 PROCESSES OR AGENTS FOR THE DIAGNOSIS AND TREATMENT OF SCHIZOPHRENIA
 AND RELATED DISORDERS**

Transmitted herewith is a signed inventor Declaration in the above-identified application. The following checked items are applicable:

☒ In the event a Petition for Extension of Time is required by this paper and not otherwise provided, such Petition is hereby made and authorization is provided herewith to charge Deposit Account No. 23-0804 for the cost of such extension.

☐ _____ is hereby appointed Associate Attorney by:
 Registration No.:

 Attorney of Record:
 Registration No.:

☒ Other: Executed Declaration Of Richard C. Deth, Ph.D. Under 37 C.F.R. §1.132

CLAIMS AFTER AMENDMENT:	MINUS PRIOR PAID CLAIMS:	EQUALS PRESENT EXTRA CLAIMS:	RATE:	ADDITIONAL FEE:
Independent	2 - 3	= -0-	x \$84.00 =	-0-
Total	9 - 20	= -0-	x \$18.00 =	-0-
<input type="checkbox"/> Multiple Dependent Claims (1st presentation)			+ \$280.00 =	-0-
SUBTOTAL ADDITIONAL FEE				-0-
Small Entity filing, divide by 2. Small Entity status must be asserted.				-0-
TOTAL ADDITIONAL FEE				-0-

☒ No additional fee. ☐ The fee has been calculated above; authorization is provided herewith to charge Deposit Account No. 23-0804 (\$ _____) for the cost of same.

☒ The Commissioner is hereby authorized to charge payment of any additional filing fees under §1.16 associated with this communication or credit any overpayment to Deposit Account No. 23-0804.

I hereby certify that this correspondence is being sent via facsimile to Examiner Sandra L. Wegert, TC Art Unit 1647, Fax No. (703) 308-4242, on Oct. 23, 2003

SUBMIT IN TRIPLICATE
 HCH/raw 297542-1

Holliday C. Heine
 Attorney of Record: Holliday C. Heine, Ph.D.
 Registration No.: 34,346